

## APPLICATION DATA SHEET

### APPLICATION INFORMATION

Application Type::	REGULAR
Subject Matter::	UTILITY
CD-ROM or CD-R?::	NONE
Title::	HOUSING FOR ELECTRONIC DEVICE WEARABLE ON USER'S FINGER
Attorney Docket Number::	244707US17
Total Drawing Sheets::	13

### INVENTOR INFORMATION

Applicant Authority Type::	INVENTOR
Primary Citizenship Country::	United States
Status::	FULL CAPACITY
Given Name::	Kai
Family Name::	Marcucelli
City of Residence::	Needham
State or Province of Residence::	Massachusetts
Country of Residence::	United States
Street of Mailing Address::	c/o Fila Sport, Inc. 83 Pine Street
City of Mailing Address::	Peabody
State or Province of Mailing Address::	Massachusetts
Country of Mailing Address::	United States
Postal or Zip Code of Mailing Address::	01960

Applicant Authority Type:: INVENTOR  
Primary Citizenship Country:: United States  
Status:: FULL CAPACITY  
Given Name:: Craig  
Family Name:: Wojcieszak  
City of Residence:: Lee  
State or Province of Residence:: New Hampshire  
Country of Residence:: United States  
Street of Mailing Address:: c/o Fila Sport, Inc.  
83 Pine Street  
City of Mailing Address:: Peabody  
State or Province of Mailing Address:: Massachusetts  
Country of Mailing Address:: United States  
Postal or Zip Code of Mailing Address:: 01960

Applicant Authority Type:: INVENTOR  
Primary Citizenship Country:: United States  
Status:: FULL CAPACITY  
Given Name:: Edward  
Middle Name:: C.  
Family Name:: Frederick  
City of Residence:: Brentwood  
State or Province of Residence:: New Hampshire  
Country of Residence:: United States  
Street of Mailing Address:: c/o Fila Sport, Inc.  
83 Pine Street  
City of Mailing Address:: Peabody  
State or Province of Mailing Address:: Massachusetts  
Country of Mailing Address:: United States  
Postal or Zip Code of Mailing Address:: 01960

#### CORRESPONDENCE INFORMATION

Correspondence Customer Number:: 22850

#### REPRESENTATIVE INFORMATION

Representative Customer Number:: 22850

#### DOMESTIC PRIORITY INFORMATION

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	119(e) of	60/456,549	03/24/03

#### ASSIGNMENT INFORMATION

Assignee Name:: Fila Luxembourg S.A.R.L.  
 Street of Mailing Address:: 46/A Avenue J. F. Kennedy  
 City of Mailing Address:: Luxembourg  
 Country of Mailing Address:: Luxembourg  
 Postal or Zip Code of Mailing Address:: L-1855